



MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
STATE PUBLIC HEALTH LABORATORY
BREATH ALCOHOL PROGRAM
DATAMASTER MAINTENANCE REPORT

RECEIVED

By Carol Day at 4:03 pm, Sep 06, 2013

REPORT #6

Complete this report at the time of the regular monthly preventive maintenance check (not to exceed 35 days).
Complete this report whenever the instrument is serviced or repaired and whenever it is placed into service.
Retain the original and send a copy within 15 days to the Breath Alcohol Program, DHSS.

DATAMASTER SN 201237	NAME OF AGENCY Lee's Summit Police Department	DATE OF INSPECTION 09/05/2013
LOCATION OF INSTRUMENT (STREET AND CITY) 10 NE Tudor Rd, Lee's Summit, MO 64086		TIME OF INSPECTION 3:50 pm

CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed values where determined.) Unmarked items must be corrected before using instrument.

<input checked="" type="checkbox"/> DIAGNOSTIC CHECK (PRINTOUT ATTACHED)	DATE AND TIME (from printout) 09/05/2013 1550 HRS
<input checked="" type="checkbox"/> COMPUTER	<input checked="" type="checkbox"/> DETECTOR
<input checked="" type="checkbox"/> PROGRAM	<input checked="" type="checkbox"/> FILTERS
<input checked="" type="checkbox"/> HEATERS SAMPLE CHAMBER 49.0 °C	<input checked="" type="checkbox"/> QUARTZ STANDARD
<input checked="" type="checkbox"/> FLOW DETECTOR	<input checked="" type="checkbox"/> CALIBRATION
<input checked="" type="checkbox"/> PUMP HIGH SPEED	<input checked="" type="checkbox"/> PRINTER

☒ INDICATOR LIGHTS

☒ SIMULATOR SOLUTION SUPPLIER Guth Laboratories LOT # 12040 EXP. DATE 03/07/2014

☒ SIMULATOR TEMP (34°C ± 0.2°C) 34.0 °C SIMULATOR SN SD3148 EXP. DATE 01/07/2014

☒ CALIBRATION CHECK - (ONLY ONE STANDARD IS TO BE USED PER MAINTENANCE REPORT)

Run three tests using a standard solution. All three tests must be within ±5% of the standard value and must have a spread of .005 or less. Mark the box corresponding to the standard solution being used. (PRINTOUT ATTACHED)

- ☒ 0.100% STANDARD - MUST READ BETWEEN 0.095% AND 0.105% INCLUSIVE
☐ 0.080% STANDARD - MUST READ BETWEEN 0.076% AND 0.084% INCLUSIVE
☐ 0.040% STANDARD - MUST READ BETWEEN 0.038% AND 0.042% INCLUSIVE

TEST 1 .100

TEST 2 .100

TEST 3 .098

☒ PERFORM R.F.I. TEST (PRINTOUT ATTACHED)

INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT:
(DO NOT INCLUDE SELF-ADMINISTERED TESTS)

REFUSALS	0	(0-.04)	0	(.05-.09)	0	(.10-.14)	1	(.15-.19)	0	OVER .19	1
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LIST ANY NEW PARTS AND DESCRIBE ANY ALTERATION OR MODIFICATION THAT WAS MADE TO RESTORE THE INSTRUMENT TO OPERATE SATISFACTORILY AND WITHIN ESTABLISHED LIMITS
(USE OTHER SIDE IF NECESSARY).

None

INSPECTING OFFICER

SIGNATURE <i>Jennifer L Kudzinski</i> 0324	PRINT FULL NAME MPO Jennifer L Kudzinski
TYPE II PERMIT NUMBER/EXPIRATION DATE 230621 06/12/2015	TELEPHONE NUMBER (816) 969-4150

RETURN COMPLETED REPORT TO THE: Breath Alcohol Program, MO Department of Health and Senior Services, Southeast District Office
2875 James Blvd.
Poplar Bluff, MO 63901

FACE THIS SIDE DOWN - THIS EDGE IN FIRST

BAC DataMaster

Evidence Ticket

STATE OF MISSOURI
LEES SUMMIT POLICE DEPARTMENT

BAC DATAMASTER SERIAL NUMBER 201237
09/05/13

TESTING OFFICER:
KUDZINSKI/JENNIFER
OFFICER I.D.: 0524
PERMIT NUMBER: 230121
EXPIRATION DATE: 06/12/15
MISCELLANEOUS DATA:

--- SUPERVISOR MODE ---

BLANK TEST	.000	15:38
INTERNAL STANDARD	VERIFIED	15:38
EXTERNAL STANDARD	.100	15:39
BLANK TEST	.000	15:40
EXTERNAL STANDARD	.100	15:40
BLANK TEST	.000	15:41
EXTERNAL STANDARD	.098	15:41
BLANK TEST	.000	15:42

N = 3
SIM. = .1
AVG. = .0993

OPERATOR SIGNATURE

Card Stock No.
60021

REORDER ALL SUPPLIES FROM N.P.A.S.
P.O. BOX 1435, MANSFIELD, OH 44901



STATE OF MISSOURI
DEPARTMENT OF HEALTH AND SENIOR SERVICES
BREATH ALCOHOL PROGRAM

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PERMIT
TYPE II

JENNIFER KUDZINSKI

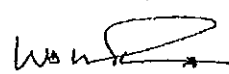
Is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

DATAMASTER, INTOXILYZER 5000, ALCO-SENSOR IV W/PRINTER

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE 06/12/2013
NUMBER 230121
EXPIRES 06/12/2015

MO 880-0771 (8-10)


DIRECTOR OF STATE PUBLIC HEALTH LABORATORY

Acting Director

DIRECTOR OF DEPARTMENT OF HEALTH AND SENIOR SERVICES

LAB-4 (R5-10)



GUTH LABORATORIES, INC.
60 NORTH 5TH STREET • HARRISBURG, PA 17101-4211 • TELEPHONE 717-894-6200

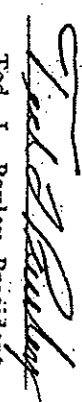
CERTIFICATE OF ANALYSIS

Certified Alcohol Reference Solution for Simulator.

Random Samples of Lot Number 12040 of Alcohol Reference Solution for Simulator were analyzed by gas chromatography on March 9, 2012, using a Perkin Elmer Gas Chromatograph Autosystem XL S/N: 610N9030209, and found to contain 0.1211% (w/vol) ethyl alcohol. The expiration date for this lot number is March 7, 2014 at 11:59 PM.

When used in a calibrated Simulator, operating at 34°C +/- .2°C, this solution will give a breath alcohol analysis instrument reading of 0.100 g/210L +/- 3%.

The alcohol and water used in this solution were free of test interfering substances.


Ted L. Pauley, President
GUTH LABORATORIES, INC.

NIST Traceability:
Testing was conducted using Certified Reference Standard lot number FNI22211-02 whose values are traceable to NIST.
All balances are calibrated annually by an outside agency using NIST traceable weights.
Calibration verification is done prior to each use utilizing NIST traceable weights.